

in and out. The view from the veranda is particularly fine and "White-face," the highest mountain in this region, is an endless pleasure, reflecting as it does the ever varying sunsets.

The patients are expected to begin the "cure" at nine o'clock in the morning; at a quarter of one there is an intermission for dinner till two o'clock. From then until a quarter of six, outdoors again, when the day's work comes to an end. Very enthusiastic patients spend the evenings in the open air, beside sleeping out at night. These persons deserve to be cured. In the warm weather there is no excuse for not wanting to live out of doors, but in winter, in the severe cold, one is apt to regard this as a very cruel world and long for an excuse to go inside.

Porch teas are the customary afternoon dissipation and from three until half after five, summer or winter, may be seen groups of men and girls enjoying this mild form of excitement. In winter it is sometimes difficult to serve the tea hot, but excuses are unnecessary as all understand the penalty of staying in the house during the hours of "cure."

The statistics of the Adirondack Cottage Sanitarium show most satisfying results of the treatment in vogue there. The gratitude of hundreds of persons is due to the tireless efforts of Dr. Trudeau and the friends who have helped him in this work. To quote from the first annual report, "The undertaking was one which, in this country at least, had no precedent."

Since that time, the year 1886, numerous other institutions for the same cause have been established, none however with a more beautiful setting or showing a better record of health. It has made the names of Trudeau and Saranac Lake famous the world over and there is every prospect for a brilliant future.

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## THE NAVY NURSE CORPS

By ESTHER V. HASSON, R.N.

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EARLY in May of 1898 four women graduate nurses left Washington for Key West, Florida, under orders from the Surgeon-General of the Army to report to the medical officer in command of the military hospital at that place for such duty as he might assign to them. Little did the nurses of this country think, at the time, of the far-reaching results of this order and that these women were the nucleus around

which would form, first the corps of contract nurses, and later on, in 1901, the permanent organization of the Army Nurse Corps as it exists to-day. Their plunge into this (to the average nurse of that date) unknown field of work was like unto the traditional pebble cast into the sea of military nursing. The tiny ripples set in motion have spread out in gradually increasing circles until the little group of women on the extreme outer edge who at present represent the nurse corps of the Navy are already beginning to wonder upon what shores the last ripples will break.

Although the Army Nurse Corps was distinctly the product of war, the Navy corps is the indirect outcome of its proven worth and efficiency, not only in time of great national emergency, but of peace as well. Mrs. Kinney has ably written up the preliminary work of legislation from the first bill (drafted by Medical Director Boyd, U. S. N.) which, had it proved acceptable to the Senate Committee on Naval Affairs, would have given us at once all of the advantages which must now come slowly and only as the result of special legislation; to the bill of February, 1908, which authorized a corps of trained women nurses for the Navy with the same pay, allowances, emoluments and privileges as are now, or may hereafter be, allowed for the nurse corps of the Army, so that it is not necessary to enter into any recapitulation of these details.

The interval of time between the introduction into Congress of these two bills represents about five years, and during this period of waiting the Surgeon-General of the Navy and his assistants in the Bureau of Medicine and Surgery never once lost sight of the coming of the women nurses into the Navy, so that when, on the eighteenth of last August, I entered upon the duties of superintendent of the corps I found already under way a broad general plan of organization. Roughly outlined it provided that all nurses eligible for appointment must be graduates of a general hospital giving a course of instruction covering a period of at least two years, and if coming from the states where registration is in force they must also be registered nurses.

All applicants will be required to pass a rigid physical and mental examination, and for the present, at least, the latter will invariably be held in Washington. The examination is required in all cases irrespective of whether the applicant has had previous Government service, either civil or military. Candidates whose qualifications reach the required standard will receive appointment with as little delay as possible after examination. The first few months of service will invariably be spent at the Naval Medical School Hospital in Washington, and

after this term of trial, the nurses will be distributed to the various naval hospitals in the United States, Japan, the Philippines and Hawaii where it is deemed advisable to station women nurses.

The work of organization is to be very gradual and for the present the corps will be expanded at the rate of only about ten nurses every six months, but as the work becomes thoroughly systematized it is hoped to progress more rapidly. This plan is so eminently practical and well adapted to the needs of the service that it at present forms the solid base upon which it only remains to build up the details.

The examination for entrance is both written and oral and will include questions on the following subjects: general nursing, materia medica and toxicology, surgical nursing, first aid, and practical dietetics with special reference to the preparation of invalid diet.

During the period spent in the naval hospital in Washington, nurses will be expected to inform themselves in regard to the rules, regulations and etiquette of the service, also of the different degrees of rank with insignia of same, not alone of the commissioned officers, but of the warrant and petty officers as well. Head nurse positions will in all cases be filled by promotions from the grade of nurse.

As all of the nurses (including the superintendent) are new to the ways of the service, and the service is equally new to the ways of the woman nurse, this first six months is regarded largely as an experimental period by both sides. As it draws to a close such regulations will be drawn up for the future government of the corps as actual experience may prove to be desirable and necessary.

As each group of nurses leaves Washington for some other post of duty, a copy of these regulations will be furnished the chief nurse of the party, and another copy will be forwarded to the medical officer in command of the hospital for which the nurses are destined. In this the duties of the nurse will be as clearly defined as it is ever possible to define such duties. In this way we hope to make the nursing in our eighteen general hospitals somewhat uniform, so that when ordered from one to the other the nurse will know about the conditions she will encounter in regard to scope of work, hours of duty, duration and frequency of night details, personal privileges, etc. Any such regulations must of necessity be very faulty and inadequate at first, but by constant revision it is hoped to make them as perfectly adapted to such varied conditions as general regulations can ever be.

One of the principal duties of the woman nurse in the Navy will be the bedside instruction of the hospital apprentices in the practical essentials of nursing, and for this reason she must be thoroughly con-

versant with the head nurse routine of a ward. When treatments, baths, or medication come due it is not expected or desired that she will always give these herself, but it will be her duty to see that the apprentices attached to the ward carry out the orders promptly and intelligently. This arrangement does not, however, absolve the nurse in any way from doing the actual nursing work whenever necessary, but is in a line with the general principle instilled into her from first to last, and which she is expected to always keep uppermost in her mind. I mean the improvement of the apprentices to whom the bulk of the nursing of the Navy afloat will always fall, for it is not the intention of the Surgeon-General to station women nurses on any but hospital ships.

The first few months of service is, as it were, a period of probation during which the nurse will be under observation as to her suitability for naval nursing. To be dropped from the corps at the end of this time may not, and in most cases will not, imply anything derogatory to the character or even to the professional ability of the nurse, as it will usually merely mean that she is lacking in the peculiar qualities requisite in work of this nature, namely: the cheerful disposition that accepts the ups and downs incidental to changes of station; that adapts itself easily to new environment; that accepts the undesirable detail without complaint and confidently looks forward to the better luck that will surely come next time. Above all she must possess in the highest degree the quiet dignity of bearing which alone can command respect from the apprentices or male nurses whom she must instruct. Although she possesses all else, and yet lacks this one quality, she had best seek another vocation at once as she would be absolutely useless for the work we wish her to do. The ability to get on with others will also be a very valuable adjunct. Ample authority will be given the nurse in all that pertains to the nursing, but we all know that there are women who can produce good results and maintain discipline without keeping things constantly in a state of turmoil. In a training school when a pupil nurse proves unsatisfactory another can easily be found to take her place, but with the hospital apprentice it is different, for the Navy is always far short of the number required, from which it will readily be seen that the woman who can inspire the male nurses with a pride in their work and a desire to learn, and who at the same time can reduce to a minimum the friction always incidental to a change in the old order of things, will be the most valuable woman for naval work. Failure to get on harmoniously with co-workers of the corps would be another decided drawback to success. In other words, dignity, self-control and courtesy are the keystones to the situation.

And now in conclusion a few words as to the selecting and appointing of the nurses.

Upon application either to the Surgeon-General of the Navy or the superintendent of the corps, the circular of information will be mailed to all who request it. In it is contained the form to be used for making formal application for permission to take the examination. This application should invariably be addressed to the Surgeon-General; it is turned over by him to the superintendent for a thorough investigation of the applicant's school, credentials, etc. If satisfactory, it is then placed in the general application file for possible reference at a later date, as the corps is to be expanded very gradually, and in time of peace it will probably never number more than a hundred members. It will readily be seen that only a small number of the many desirable applications received can be considered when selecting candidates for the examinations, which for the present will be held in Washington only. As the expense of travelling to, and of subsistence while there, must be borne by the applicant, I have thus far only summoned the number of women actually required for immediate need. In case of failure, or of the non-appearance of a candidate, another examination is at once held to supply the deficiency.

The successful ones will receive appointment with but little delay. It is impossible to say how long this method will be continued, as I hope e'er long that some arrangement will be made which will enable applicants to take the examination at some designated city in their own states.

Before leaving the subject of applications and appointments I wish to say that all letters requesting information in regard to the corps may be addressed either to the Surgeon-General of the Navy or to the superintendent, but it is unnecessary to address both on the same subject, as has frequently been done. As a matter of fact it is one of the duties of the superintendent to reply to all letters concerning the corps, irrespective of address.

It is too soon as yet to outline the scope of the work or to make predictions as to the future of the corps, but it is my most earnest hope to make it a dignified, respected body of women, governed largely by that feeling of *esprit de corps* without which no rules ever devised will be of avail to keep us free from all that approaches scandal or disagreeable comment.

Undoubtedly the future status of the Navy corps will rest largely in the hands of its members, and especially is this true of the first nurses. If they are content with low standards either professionally,

morally, or socially the status of the corps will be fixed for all time. Future women will accept the standard set by us now without question; if it be high they will rise to it, if it be low they will with equal facility drop to its level.

We nurses who come into the nursing service of the Navy during this first year of its existence are the pioneers, and it rests with us to make the traditions and to set the pace for those who are to follow, and so upon our shoulders rests a great responsibility. I am sure that the nursing profession of the country will extend to us its hearty good wishes for success in our undertaking.

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## THE SMALL HOSPITAL

By ELLA M. MILLER, R.N.

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THE small hospital has come in for a large share of criticism and disparagement. Some even go so far as to deny its right to existence. Unfortunately all of our patients cannot go to the city hospitals. Some are too ill to be moved, others prefer to remain at home near family and friends. It is not always possible to secure a nurse nor can every family afford one. To such people the small hospital means just as much as the large one. Even a moderately equipped operating room offers better advantages for aseptic surgery than can possibly be devised in an ordinary home.

There can be no question that many lives are saved, many gynæcological and other operations, which would otherwise be neglected, performed, many medical cases given excellent care in the small hospital. The doctors are able to do better work on account of them, in fact their advantages are the advantages of hospitals everywhere and their success is worthy of our best efforts.

To maintain a hospital of from ten to twenty-five beds, too small for a regular training school, and give good service to the sick at a moderate price, is a problem that has not been solved. Trained nurses charge too high prices and few can be found who are willing to again go through the routine of ward work after graduation. The lay nurses or partially trained nurses nearly always prove to be a disappointment, being found both incompetent and unreliable. It has been suggested that young girls be taken for training who are ineligible elsewhere.